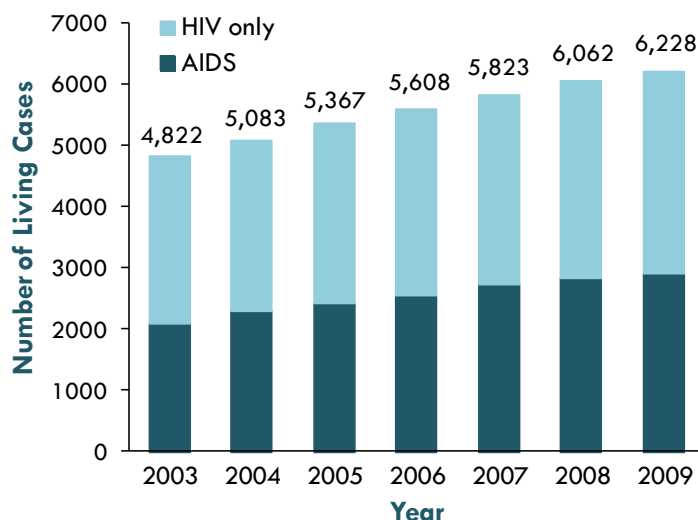


**Heterosexual** contact is the most common HIV transmission method among women and the second most common among men. In recent years, 27-30% of the estimated HIV incidence\* in the US was attributed to heterosexual contact (Prejean, 2011). In Virginia, an estimated 6,228 persons living with HIV/AIDS (PLWHAs) at the end of 2009 were infected through heterosexual transmission; the majority (71%) were women†.

## HIV/AIDS PREVALENCE

As of December 31, 2009, an estimated 28% of all Virginians living with HIV disease were infected due to heterosexual contact and 47% of this population (2,919) had progressed to the AIDS stage of the disease. The majority were non-Hispanic Blacks (76%) while 14% were non-Hispanic Whites and 8% were Hispanics. Overall, men accounted for an estimated 29% of those infected by heterosexual contact. When separated into age groups, men tend to be diagnosed later in life than women. For heterosexually diagnosed between the age of 13-19 and who resided in the state at the end of 2009, only 10% were men. The proportion of males increases with age; among heterosexuals who were 40 or older at the time of diagnosis and who were living in Virginia at the end of 2009, approximately 38% were men.

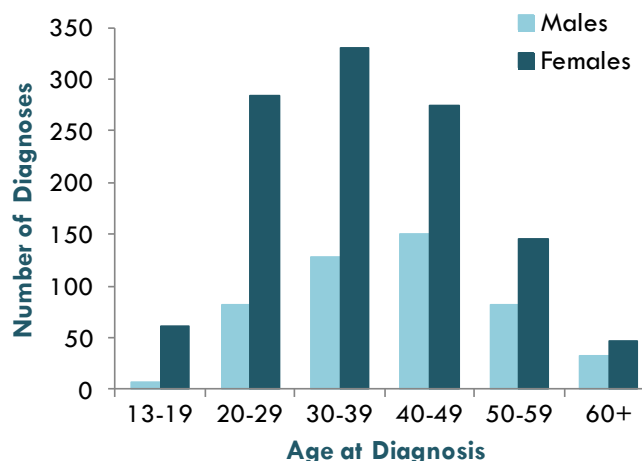
**PLWHAs in Virginia Attributed to Heterosexual Transmission, 2003-2009**



## HIV DISEASE DIAGNOSES

From 2005 to 2009, there were an estimated 1,627 diagnosed cases of HIV disease attributed to heterosexual transmission in Virginia. The majority of this population was female (70%). The racial distribution of the recent diagnoses was similar to that of heterosexuals currently living with HIV: 77% were Blacks, and Whites and Hispanics each accounted for 10%.

**HIV Disease among Heterosexuals in Virginia by Gender and Age at Diagnosis, 2005-2009**



Among those first diagnosed during this 5-year period, approximately 77% were between the ages of 20 and 49. While women represented a greater proportion at all ages, their peak age of diagnosis was 30-39, whereas for men it was 40-49. Also, compared to the MSM transmission category, those in the heterosexual transmission category tend to be older at the time of diagnosis.

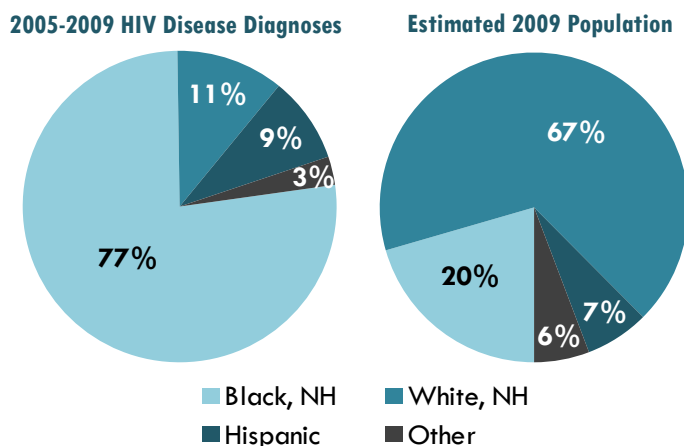
## Among Men

Among heterosexual males diagnosed with HIV disease in Virginia, Blacks represented the majority (76%), followed by Hispanics (14%) and Whites (7.8%). By age, the greatest proportion were those first diagnosed between ages of 40-49 (31%) while those who were 30-39 at time of diagnosis comprised another 27% of the total heterosexual HIV disease diagnoses from 2005-2009.

## Among Women

Women are disproportionately affected by HIV/AIDS among heterosexuals, especially women of color. While the 2009 estimated female population in Virginia consisted of only 20% non-Hispanic Blacks and 7% Latinas/Hispanics, 77% and 9% of the total 2005-2009 HIV disease diagnoses among women were Blacks and Hispanics, respectively.

**HIV Diagnoses vs. Estimated 2009 Population among Virginia Females, by Race/Ethnicity<sup>^</sup>**



There were 1,144 cases of HIV disease diagnoses in Virginia women from 2005 to 2009 attributed to heterosexual transmission. Among them, women between the ages of 30 and 39 at the time of diagnosis comprised the largest group (29%), followed by those aged 20-29 (25%) and 40-49 (24%).

A number of factors contribute to women's high HIV risk, including problems negotiating condom use with their male partners, socioeconomic disadvantages preventing access to medical care, and poor knowledge about HIV/AIDS (Hodder, 2010). Many MSM, especially Blacks and Hispanics, do not self-identify as gay, have sexual intercourse with both men and women without disclosing their sexual behavior to partners, and are inconsistent with condom usage (Wolitski, 2006). In addition, women who have experienced childhood sexual abuse or domestic violence are at higher risk for HIV infection than the general population (Cohen, 2000).

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\*Data presented in the national HIV incidence report are annual estimates of the number of new infections, whether or not they were actually diagnosed. In contrast, Virginia data are based on new diagnoses each year, which can include persons who were infected in previous years. These two sets of data cannot be directly compared; they are presented here only to show similarity in trends.

†Data and percentages presented are estimates of the heterosexual transmission category using the CDC provided multiple imputation procedure for cases reported without an identified or reported risk.

<sup>^</sup>Other races and ethnicities include Asian/Pacific Islander, American Indian/Alaskan Native, multi-racial and others.